

PTO/SB/82 (06-03)

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**REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY**

Application Number	10/727,605
Filing Date	December 5, 2003
First Named Inventor	Marcin S. KASPRZAK et al.
Art Unit	
Examiner Name	
Attorney Docket Number	PAT 2289-2

I hereby revoke all previous powers of attorney given in the above-identified application:

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name Jerzy, H. SOKOLOWSKI

Signature 

Date APR 21/04

Telephone (519) 253-2000 ext. 3588

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

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PTO/SB/82 (06-03)

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

Name	Marcin Stanislaw KASPRZAK		
Signature			
Date	April 15, 2004	Telephone	011 48 32 2427228

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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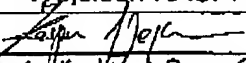
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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Wojciech KASPRZAK		
Signature			
Date	April 16, 2004	Telephone	(519) 253-2000 ext. 3744

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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